

Comprehensive Care Facilities

Health Information Technology Adoption

An Information Brief

February 15, 2018



The MARYLAND HEALTH CARE COMMISSION

Framing the Discussion

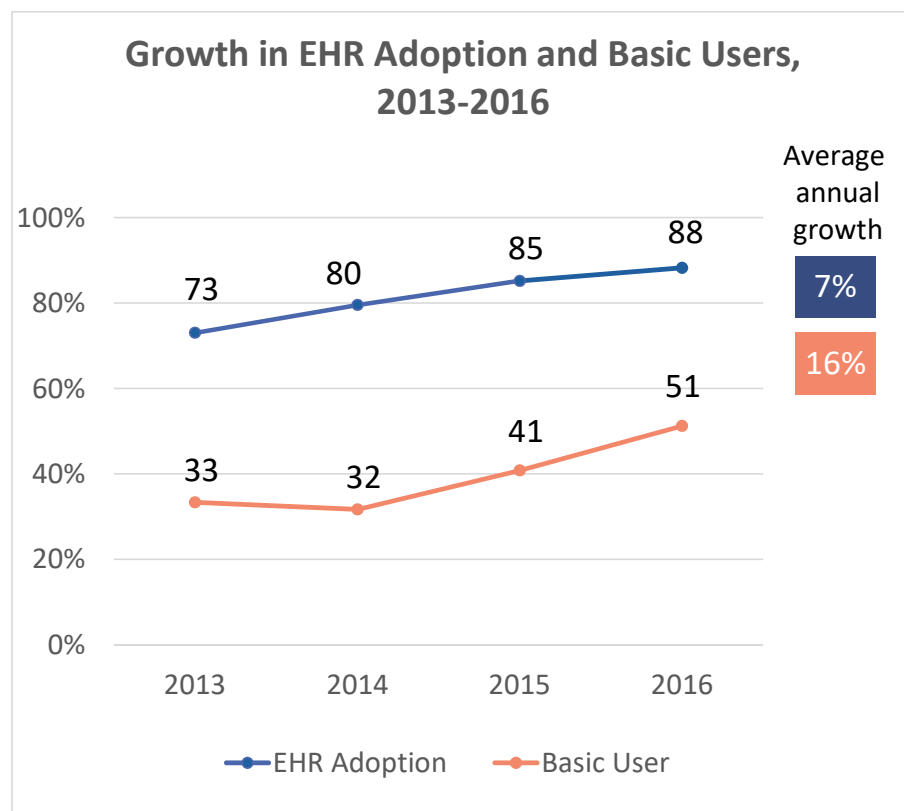
- Diffusion of health IT among comprehensive care facilities (CCF) has increased; however, CCF adoption trails other health care providers
- Health IT in CCFs has the potential to improve transitions of care, care coordination, and medication reconciliation for patients who typically present with complex chronic conditions
 - CCFs were ineligible for federal EHR adoption incentive programs, and typically have limited operating budgets



About the Assessment

- Staff analyzed data from MHCC's Annual Long Term Care Survey
 - Includes responses from CCFs from 2013 to 2016
- Findings intended to inform:
 - Stakeholder awareness of CCF health IT capabilities
 - Health IT diffusion initiatives

EHR Adoption

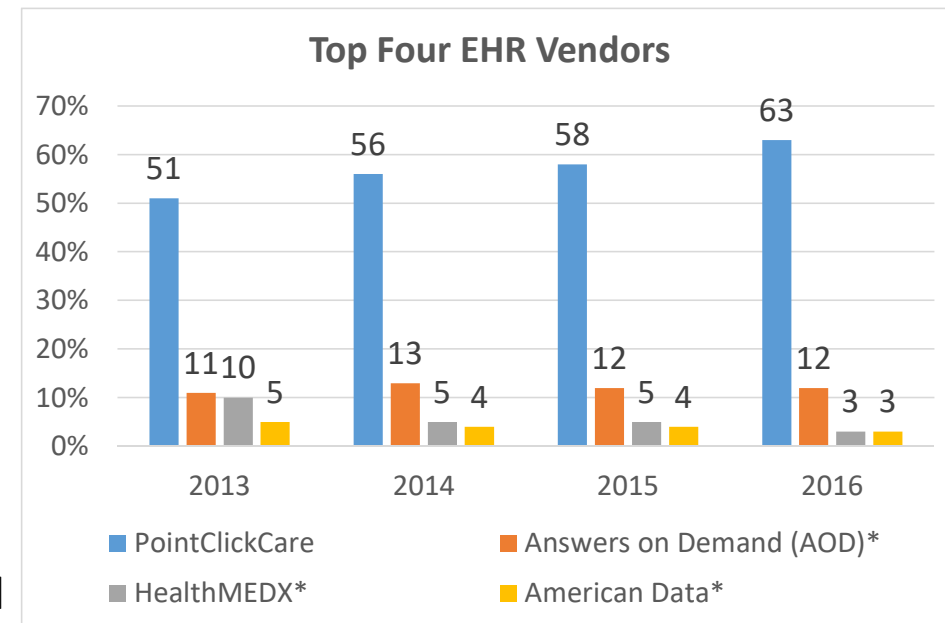


Notes: N=233 (2013); N=230 (2014); N=230 (2015); N=229 (2016)
There is currently no national benchmark for basic EHR use.

- EHR adoption among Maryland CCFs exceeds the national adoption rate (88 percent compared to 64 percent)
- Chain and non-chain adopting EHRs at similar rates (~88 percent)
- Basic EHR adoption is characterized by seven core functions
- Basic use among chains and non-chains increased at a comparable rate (15 percent and 17 percent)

Vendor Landscape

- PointClickCare (PCC) continues to maintain more than half of the CCF market share, growing at a rate of seven percent since 2013
 - Ranked first by KLAS Research**
 - Certified by the Office of the National Coordinator for Health Information Technology (ONC)***
- Since 2013, 49 CCFs adopted PCC
 - 59 percent adopted an EHR; 41 percent switched from another vendor
- PCC adoption is more prominent among chains (80 percent) than non-chains (39 percent)

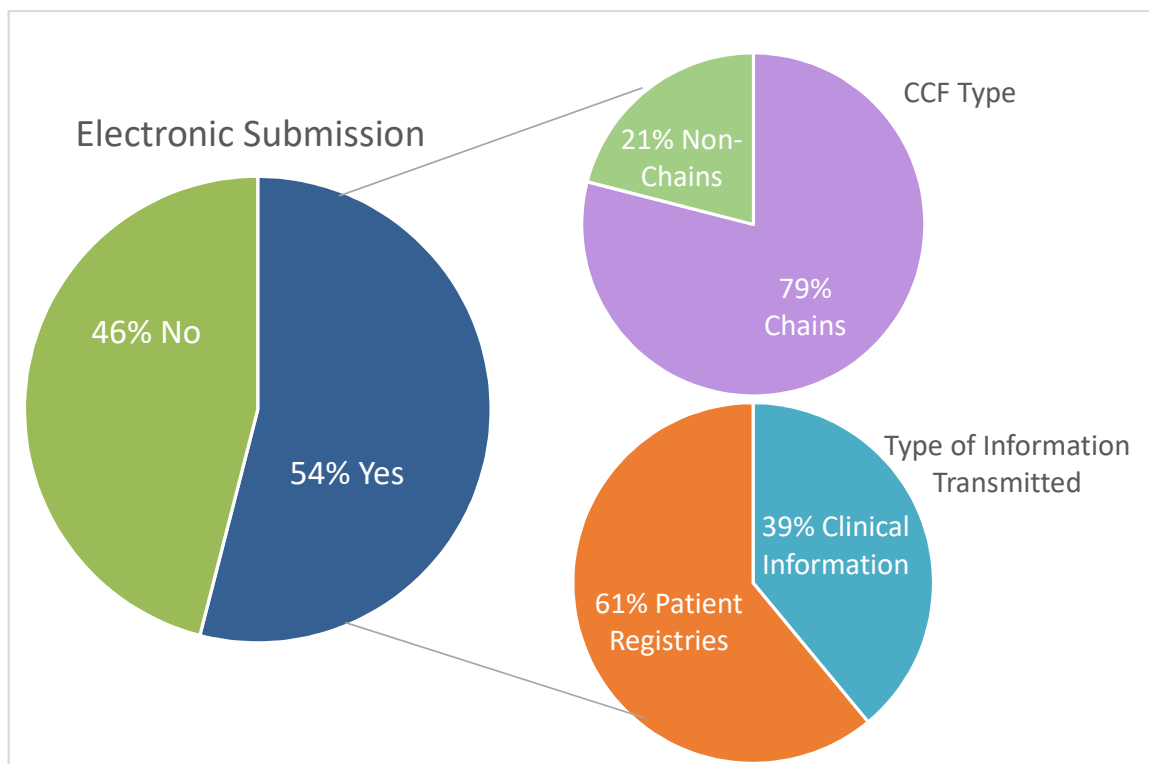


Note: *Retired ONC certification

**KLAS Research is an independent health care IT research company.

***Certification of long-term care EHR vendors is voluntary.

CRISP Connectivity – 2017

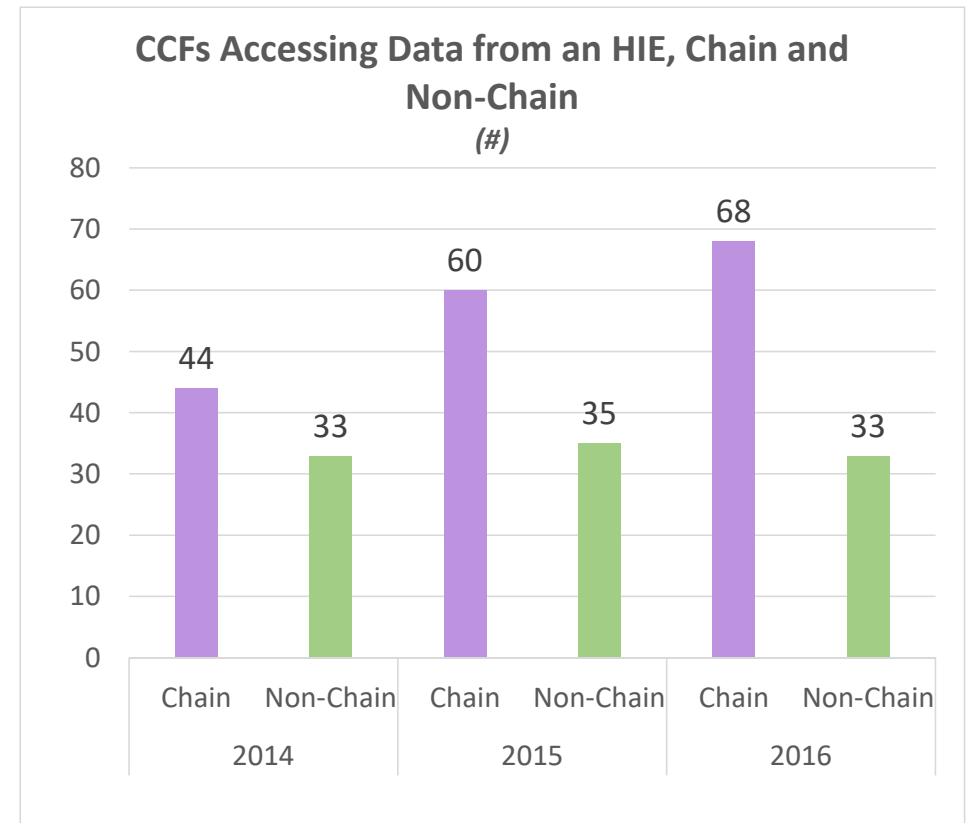


Note: Data reported by CRISP as of October 11, 2017

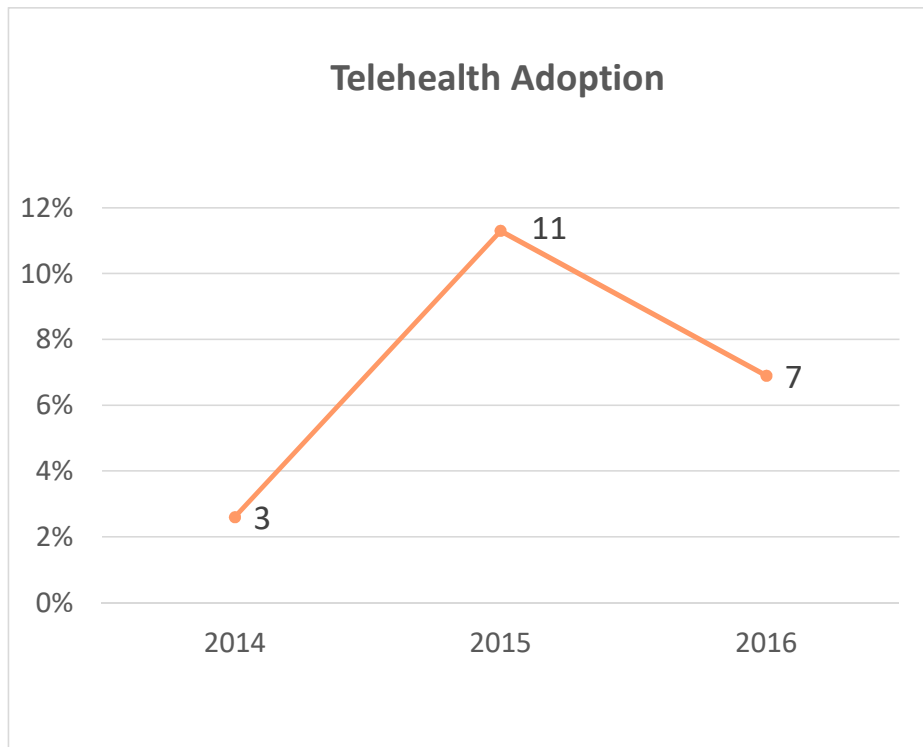
- Over half of CCFs are electronically sending data to CRISP, a 19 percent increase from 2016
- Connectivity to an HIE is around 54 percent locally, as compared to 29 percent nationally
- More chains than non-chains are electronically sending information to CRISP (98 chains compared to 26 non-chains)

HIE Activity

- Accessing an HIE occurs more frequently in chains; they have experienced a 24 percent growth
- Non-chains that tend to access an HIE more often are:
 - Slightly larger (average 125 beds versus 105 beds)
 - For-profit (64 percent compared to 27 percent)



Telehealth



Note: Variation between 2015 and 2016 largely attributed to one chain discontinuing its telehealth program.

- Fairly consistent with prior years, most CCFs (77 percent) remain undecided about implementing telehealth within the next 12 months
- 30-67 percent of hospitalizations among residents could be avoided using telehealth (*Kaiser Family Foundation*)
- Leading challenges: savings largely benefit payors; equipment costs; staff training; technical infrastructure and IT staff

Moving Forward

- Collaborate with LifeSpan and Health Facilities Association of Maryland to develop health IT awareness initiatives
- Provide selective consultative support to CCFs to expand health IT adoption and meaningful use of health IT over the next year
- Explore opportunities to increase consumer awareness of CCFs that have adopted an EHR, highlight:
 - Care delivery and care coordination value
 - Significance in transitions of care

Thank You!



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Appendix

EHR Adoption by Year

The table depicts the number of CCFs that reported EHR and basic use adoption from 2013 to 2016 and the compound annual growth rate (CAGR) for that time period.

Growth in EHR Adoption					
	2013 (N=233)	2014 (N=230)	2015 (N=230)	2016 (N=229)	CAGR
EHR Adoption	168	183	196	203	7%
Basic Use	56	58	80	104	16%